

27 Maple Street  
Arlington, MA 02476  
781-316-3400



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## ELDERLY AND DISABLED TAX RELIEF FUND APPLICATION FY 2022

### Requirements:

- You must be 60 years or older as verified by a government issued photo ID OR
  - Have a state recognized disability
- AND
- You must meet income eligibility requirements: **\$58,000 (Single), \$73,000 (Head of Household), \$88,000 (Filing Joint)** **available assets** may not exceed **\$100,000**.
  - You must pay your tax bill even if you complete this application.
  - Application is due **by January 31, 2022**

### Program Information:

Application period is from September 1, 2021 - January 31, 2022

The Committee will meet to review applications in April and decisions will be mailed to applicants by April 15, 2022.

If funding will be granted, a reduction will be made on Quarter 4 property tax bill.

The funds available are based on donations made by residents in any given year.

Date of Application: \_\_\_\_/\_\_\_\_/\_\_\_\_

Property Owner(s): (Name(s) as appears on your tax bill) \_\_\_\_\_

Street Address: \_\_\_\_\_

How long have you resided at this address? \_\_\_\_\_

How long have you lived in Arlington? \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work/Cell Telephone: \_\_\_\_\_

Are you disabled? Yes \_\_\_\_\_ No \_\_\_\_\_.

Have you ever applied for or received any exemption for your tax bill? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list when: \_\_\_\_\_

## ELDERLY AND DISABLED TAX RELIEF FUND APPLICATION FISCAL YEAR 2021

**Please complete the following chart for all those who reside at this address in addition to applicant**

Name	Date of Birth	Retired	Working	Unemployed

**Please provide a copy of your most recent tax return.** If you are unable to include a copy of a tax return, please let us know about any monthly income you receive using this list:

Type of Income	Monthly
Employment	\$
Interest/Dividend Income	\$
Public Assistance (SNAP, Fuel Assistance)	\$
Social Security	\$
SSI/ SSDI	\$
Unemployment	\$
Pension	\$
VA Benefits	\$
Alimony/Child Support	\$
Property Tax Work Off	\$
Other:	\$
Other :	\$
Other:	\$
	\$

**Total Monthly Income:** \$ \_\_\_\_\_

**Please list other assets. For example: checking, savings 401(k) plans, stocks, certificates of deposit, and other real estate owned**

[illegible]

## ELDERLY AND DISABLED TAX RELIEF FUND APPLICATION FISCAL YEAR 2021

How many automobiles do you own? \_\_\_\_\_ Please list below.

Automobile	Year	Make	Registered	Unregistered
1				
2				
3				

Please list your expenses for a typical month

Expenses	Monthly
Monthly Mortgage	\$
Home Insurance	\$
Electric	\$
Gas	\$
Heating Oil	\$
Water/Sewer	\$
Cable/Internet	\$
Phone(s)	\$
Medical (insurance and other expenses)	\$
Prescriptions	\$
Property Taxes	\$
Automobile (gas, loan, insurance)	\$
Food	\$
Clothing	\$
Credit Card Payments	\$
Other	\$
Other	\$
Other	\$
Other	\$
Other	\$

**Total Expenses** \$ \_\_\_\_\_

# ELDERLY AND DISABLED TAX RELIEF FUND APPLICATION FISCAL YEAR 2021

## Other Information

If you would like to provide any additional comments on why you are seeking assistance with your tax bill, please include a brief description of your situation below (attach additional sheets if necessary).

[illegible]

The information provided in this application is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Attention: Owners of Property in Trust: Trust ownership arrangements may affect qualification for assistance. As a general rule, an applicant must be a trustee and a beneficiary, and submit with the application:

1. A copy of the recorded trustee's certificate;
2. A copy of the trust instrument including amendments; and
3. A copy of the schedule of beneficiaries.